



**LICENSING DIVISION**  
**BUREAU OF AUTOMOTIVE REPAIR**  
**P.O. BOX 989001**  
 West Sacramento, CA 95798-9001  
 (916) 322-4000



## Application For Station License (LAMP/BRAKE)

(Please type or print legibly with pen)

Owner(s) (Include all business partners)			
Doing business as (business name)			
Business Address		Business Telephone Number	
ARD Number			
Lamp Adjuster's Name	License Number	Expiration Date	
Brake Adjuster's Name	License Number	Expiration Date	
REASON FOR APPLICATION			
<input type="checkbox"/>	Lamp Station License	<input type="checkbox"/>	Brake Station License
<input type="checkbox"/>	Class "A" All Vehicles	<input type="checkbox"/>	Class "A" All Vehicles
<input type="checkbox"/>	Class "BL" Limited Vehicles	<input type="checkbox"/>	Class "B" Heavy Duty Vehicles Busses, Trucks, Trailers
<input type="checkbox"/>	Station License Change (attach current License)	<input type="checkbox"/>	Class "C" Passenger Vehicle and Motorcycles

### Department Use Only

Date Application Reviewed	Date Issued		
ARD Number	Checked by		
License Number	A	BL	
License Number	A	B	C

**\$10.00 FEE FOR EACH**

**LICENSE - CHECK OR**

**MONEY ORDER ONLY.**

**DO NOT SEND CASH.**

### APPLICANT'S BACKGROUND (If application is for renewal, complete B, C, & D only)

- A. Have you ever been issued any license other than those listed above, by this department?  
If yes, explain below.
- B. Have you ever had any license denied, suspended or revoked by this department or by any other state agency?  
If yes, explain below.
- C. Have you ever been issued a citation by the bureau?  
If yes, explain below.
- D. Have you ever been convicted of any offense? (Traffic violations involving fines or forfeiture of bail need not be reported.)  
If yes, explain below.
- E. Explain yes answers here \_\_\_\_\_

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Lamp Adjusting Station Equipment (Tit. 16, Cal. Code of Regs., sec. 3316)		Brake Adjusting Station Equipment (Tit. 16, Cal. Code of Regs., sec 3321)	
<input type="checkbox"/>	Aiming equipment and tools for class of this application (sec. 3316a)	<input type="checkbox"/>	Tools, gauges, and other equipment for class of this application (sec. 3321a)
<input type="checkbox"/>	Bureau of Automotive Repair Handbook for Lamp Adjusting Stations (Date _____)	<input type="checkbox"/>	Bureau of Automotive Repair Handbook for Brake Adjusting Stations (Date _____)
<input type="checkbox"/>	Service manuals, bulletins, and operating instructions for machines and instruments required for class of this application	<input type="checkbox"/>	Appropriate manuals, bulletins, and instructions required for class of this application

I declare under penalty of perjury under the laws of the State of California that the above statements are true and correct to the best of my

Owner Signature and Title	
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## INSTRUCTIONS FOR LAMP/BRAKE APPLICATION

The information you provide on this application is maintained by the Chief of the Bureau of Automotive Repair, Department of Consumer Affairs, 400 R Street, Sacramento, CA 95814, (916) 322-4000. The information is requested pursuant to Business and Professions Code section 9887.2. Your completed application becomes the property of the bureau and will be used by authorized personnel to determine your eligibility for a license, registration or permit. Information on your application may be transferred to other governmental or law enforcement agencies. Pursuant to the California Public Records Act (Gov. Code, sec. 6250 et seq.) and the Information Practices Act (Civ. Code, sec. 1798.61, the names and addresses of persons possessing a license or registration may be disclosed by the department unless otherwise specifically exempt from disclosure under the law. **Consequently, the personal name and address information entered on the attached form(s) may become public information subject to disclosure.**

It is mandatory that you provide all information requested. Omission of any item of requested information will result in the application being rejected as incomplete.

The Unruh Civil Rights Act and other state laws contain prohibitions against gender based pricing practices. Prices must be based on factors such as the difficulty of treatment or service, and not on the gender of the customer. Violators of these laws may be required to pay damages of a minimum of \$1000 for each violation as specified in Section 52 of the Civil Code. (Statutes 1994, chapter 535 (SB 1288).)

- OWNERS: Name of the person applying for the station license.
- DOING BUSINESS AS: Name of the business listed on the Auto Repair Dealer Registration certificate.
- BUSINESS ADDRESS: Address and telephone number where the business is being conducted.
- ARD NUMBER: Auto Repair Dealer Registration number.
- ADJUSTER'S NAME: Name of the licensed adjuster(s). If more than one adjuster, list the license number on a separate sheet.
- LICENSE NUMBER: License number of the adjuster.
- EXPIRATION DATE: Date that the adjuster's license expires.
- REASON FOR APPLICATION: If you do not now have a station license, check the appropriate box and related class. If you do have a license but are changing ownership or incorporating, check "STATION LICENSE CHANGE".
- HAVE YOU EVER BEEN CONVICTED? Must be answered.
- EQUIPMENT: All of the required equipment must be on the premises in proper working order and in calibration.
- MANUALS: All manuals/service instructions must be current.
- SIGNATURE: Sign and date the application.
- FEE: FOR EACH LICENSE, PLEASE ENCLOSE \$10.00 APPLICATION FEE (CHECK OR MONEY ORDER) WITH YOUR COMPLETED APPLICATION.  
**DO NOT SEND CASH**